7-3-06

REQUEST FOR CONTINUED EXAMINATION (RCE)

TRANSMITTAL

Mail Stop RCE Commissioner For Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

| Application Number: | 10/036,840 |
|-----------------------|------------------------|
| Filing Date: | December 21, 2001 |
| First Named Inventor: | Lisa Baker |
| Group Art Unit: | 3761 |
| Examiner Name: | Jacqueline F. Stephens |
| Attorney Docket No. | PGI6044P0780US |

This is a Request for Continued Examination (RCE) under 37 C.F.R. §1.114 of the above-identified application. Request for Continued Examination (RCE) practice under 37 CFR 1.114 does not apply to any utility or plant application filed prior to June 8, 1995, or to any design application.

| 1. | amend unless | dments a applica | ind ame | under 37 C.F.R. §1.114 Note: If the RCE is proper, any previously-filed unentered indments enclosed with the RCE will be entered in the order in which they were filed cts otherwise. If applicant does not wish to have any previously filed unentered, applicant must request non-entry of such amendment(s). | | | | |
|----|-----------------|---------------------|--|---|--|--|--|--|
| | a. | ㅁ | Previously submitted. If a final Office Action is outstanding, any amendments filed after the final Office Action may be considered as a submission even if this box is not checked. | | | | | |
| | | i. | | Consider the arguments in the Appeal Brief or Reply Brief previously filed on | | | | |
| | | ii. | 므 | Other: | | | | |
| | b. | ⊠ | Enclosed: | | | | | |
| | | i. | ☒ | Amendment/Reply | | | | |
| | | ii. | | Affidavit(s)/Declaration(s) | | | | |
| | | iii. | | Information Disclosure Statement | | | | |
| | | iv. | 므 | Petition for Extension of Time | | | | |
| | | V. | | Other: | | | | |
| 2. | Misce | llaneous | | pension of action on the above-identified application is requested under 37 CFR 03(c) for a period of: | | | | |
| | a. | 旦 | 1.17(i) | months. (Period of suspension shall not exceed 3 months. Fee under 37 CFR required) | | | | |
| | h | | Other | | | | | |

3. **Fees.** The RCE fee under 37 CFR 1.17(e) is required by 37 CFR 1.114 when the RCE is filed. The filing fee has been calculated as shown below:

Small Entity

Large Entity

| | | | | Siliali E | intry | _ | Laige | Entity |
|------------------------------|---------------------------|--|-----------------|------------|----------|----|------------|----------|
| For | Claims After Amendment | Highest Number Previously Paid For | Extra Claims | Rate | Fee | | Rate | Fee |
| Basic Fee | | | | | \$395.00 | OR | | \$790.00 |
| Total Claims | 9 | 20 | 0 | x \$25.00 | \$ | OR | x \$50.00 | \$ |
| Independent Claims | 1 | 3 | 0 | x \$100.00 | \$ | OR | x \$200.00 | \$ |
| Multiple Dependent Claims | | | | x \$180.00 | \$ | OR | x \$360.00 | \$ |
| 2005 HARRING | | | | TOTAL | \$ | OR | TOTAL | \$790.00 |

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790.00 OP

| | a. | i. iii. | or credi | | rpayments, to De t. | to charge the following fees, any underpayment of fees, posit Account No. 23-0785. I have enclosed a duplicate |
|------------------|---------------------|-------------------------|-----------------------|---------------------------|---|---|
| | b. | ⊠ | A chec | k in the a | amount of \$ <u>790</u> | .00 to cover the fees is enclosed. |
| 4. | Corres | ponden | ce Addr | ess: | Citigroup 500 West Chicago, Telephon | PHILLIPS, KATZ, CLARK & MORTIMER Center, Suite 3800 Madison Street Illinois 60661 E: (312) 876-1800 : (312) 876-2020 |
| | | | | (| Customer Nu | mber: 32116 |
| Date: | _June 3 | <u>30, 2006</u> | | Att | torney's Signature | Stephen D. Geimer, Reg. No. 28,846 |
| | | | | CERTIFI | CATE OF MAILI | NG BY EXPRESS MAIL |
| enclos Office | ed here to Addre | in, are be essee" se | eing dep ervice ui | osited in a nder 37 Cl | an envelope with FR 1.10 on the da | tion Transmittal and any other documents referred to as the United States Postal Service "Express Mail Post ate indicated below and addressed to: Mail Stop RCE, rginia 22313-1450. |
| Expres | ss Mail L | abel No | .: | | EV 8436 | 40949 US |

June 30, 2006

Colleen Davison

Colleen Davison

Date of Deposit:

Signature:

Typed/Printed Name of Person Signing: